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## BIB DATA SHEET

CONFIRMATION NO. 5065

| SERIAL NUMBER   | FILING or 371(c)<br>DATE   | CLASS   | GROUP ART UNIT                  | ATTORNEY DOCKET<br>NO.                                       |                     |                           |
|---|--|---|---------------------------------|--|---------------------|---------------------------|
| 10/643,602  | 08/19/2003   | 296   | 2621                            | DON01 P-1087   |                     |                           |
| <b>RULE</b>   |  |   |                                 |  |                     |                           |
| <b>APPLICANTS</b><br>Kenneth Schofield, Holland, MI;<br>Mark L. Larson, Grand Haven, MI;<br>Keith J. Vadas, Coopersville, MI;   |  |   |                                 |  |                     |                           |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 09/776,625 02/05/2001 PAT 6,611,202<br>which is a CON of 09/313,139 05/17/1999 PAT 6,222,447<br>which is a CON of 08/935,336 09/22/1997 PAT 5,949,331<br>which is a CON of 08/445,527 05/22/1995 PAT 5,670,935<br>which is a CIP of 08/023,918 02/26/1993 PAT 5,550,677 |  |   |                                 |  |                     |                           |
| <b>** FOREIGN APPLICATIONS *****</b>  |  |   |                                 |  |                     |                           |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>  |  |   |                                 |  |                     |                           |
| 11/13/2003  |  |   |                                 |  |                     |                           |
| Foreign Priority claimed<br>35 USC 119(a-d) conditions met  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance<br>DC Initials | <b>STATE OR COUNTRY</b>         | <b>SHEETS DRAWINGS</b>                                       | <b>TOTAL CLAIMS</b> | <b>INDEPENDENT CLAIMS</b> |
| Verified and Acknowledged   | /DAVID J CZEKAJ/<br>Examiner's Signature   |   | MI                              | 7  | 42                  | 2                         |
| <b>ADDRESS</b>  |  |   |                                 |  |                     |                           |
| VAN DYKE, GARDNER, LINN & BURKHART, LLP<br>SUITE 207<br>2851 CHARLEVOIX DRIVE, S.E.<br>GRAND RAPIDS, MI 49546<br>UNITED STATES  |  |   |                                 |  |                     |                           |
| <b>TITLE</b>  |  |   |                                 |  |                     |                           |
| Vision system for a vehicle including image processor   |  |   |                                 |  |                     |                           |
| <b>FILING FEE RECEIVED</b><br>1566  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following:                          |   |                                 | <input type="checkbox"/> All Fees                            |                     |                           |
|   |  |   |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                     |                           |
|   |  |   |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                     |                           |
|   |  |   |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                     |                           |
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